N.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Line Only

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2008

This report is mandatory under P L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E	OLMS OF							
1. File Number U - 9275				2 Fiscal Year Covered From:				
	<u> </u>			1/1/2	2004 Through	: 12/31	2004	
3. Name and address of person filing.				4. Name, file number, and address of labor organization.				
Name	Kenneth	M Brewer	Name	IBEW Local Un	nion 915			
			Labor	Organization File Nu	mber 038-88	12 -		
P.O. Box, Bidg., Room No., if any			POI	Box, Building and Roo	om Number, if an	у		
Street	22146 Weeks Blvd.		Street	5621 Harney	Road			
City	Land O' Lakes		city	Ташра				
State	Florida	ZIP Code + 4 34639-46	34 State	Florida		ZIP Code + 4	33610	
5 Positi	ion in labor organization	Treasurer				· · · · · · · · · · · · · · · · · · ·		
Ent	er appropriate data below it	, during the past fiscal year, you or yo (except as specified in th				of the following is	Merests	
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Name of Person Filing Kenneth Brewer	File Number U-						
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly, or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.							
8. Name and address of Business (including trade name, if any).	9. Business deals with:						
Name Tampa Area Blectrical JATC							
Trade Name, Fany Electrical Training Center	a. Labor Organization D. Trust						
P.O. Box, Bidg., Room No., if any	c. Employer						
Street 5625 Harney Road							
City Tampa							
State Florida ZIP Code + 4 33610							
10. If 9.b. or 9.c. is checked give trust or employer's name	11.a. Nature of such dealing.						
Name Tampa Area Electrical JATC Trust	Tampa Area JATC is the apprentice and journeyman training facility for electrical workers represented						
Trade Name, if any:	by IBEW Local Union 915. I am an Electrical Apprenticeship Instructor for the Tampa Area Electrical JATC (Joint Apprenticeship and Training						
P.O. Box, Bidg., Room No., if any	Committee).						
Street 5625 Harney Road	11.b. Approximate dollar value of such dealing. \$21,808						
City Tampa	12.a. Nature of interest held or income received.						
State Florida ZIP Code + 4 33610	Gross Wages for salary as an instructor: \$10,400.00 Insurance and Pension Benefits: \$6,504.48 Teacher Training & Certification Classes:\$4,403.86 Teacher's Christmas Bonus: \$500.00 (All items unrelated to IBEW Treasurer duties)						
	12.b Amount \$21,808						
	12.D AMOUR \$21,808						
C. Received from any employer (other then an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value							
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a Nature of payment.						
Name							
Trade Name, if any:							
P.O. Box, Bidg., Room No , if any							
Street							
City							
State ZIP Code + 4							
13.b. ts the Business an Employer or Consultant ?	14.b. Amount of payment.						